

Consultant doubts widespread Libby problem

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victim's advocate

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Libby may become ground zero for a war of who knows what in the medical world. And those suffering from lung abnormalities caused by exposure to asbestos from the former W.R. Grace vermiculite mine likely will be caught in the middle.

Federal toxicology experts and private practice doctors specializing in cases of asbestos exposure say the type of asbestos found almost exclusively in the vermiculite ore mined near Libby

presents an entirely new challenge that requires world-renowned lung specialists to rethink their rhetoric.

Those lung specialists, Dr. Paul Saurel Wheeler in particular, say they already know all there is to know about asbestos-related disease.

Wheeler, a pneumoconiosis expert at Johns Hopkins Hospital in Baltimore, Md., has been reading X-rays and CT scans for 30 years. He is one of the country's most senior certified B-readers, and he has testified for major corporations in several personal-injury tri-

als relating to asbestos disease.

Wheeler is an independent contractor for Health Network America, the third-party health care provider overseeing the W.R. Grace medical plan in Libby. And he says it's unlikely that 750 cases of asbestos-related disease could have popped up in a town the size of Libby. He says the number of residents diagnosed with the disease and turned over to the no-cost Grace medical plan is “disproportionate” to the 12,000

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Wheeler

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Libby-area residents.

Why should asbestos patients be concerned about the opinion of one doctor?

Because after more than 6,000 lung screenings by the federal Agency for Toxic Substances and Diseases Registry – not to mention the diagnoses of doctors who merely have worked with tremolite asbestos exposure for the past decade – Wheeler ultimately decides who really has a lung disease.

Although Wheeler has worked in a metropolitan area that was overrun by chrysotile asbestos exposure during the shipbuilding days of World War II, many doctors are saying that he has been studying the wrong type of asbestos to be making any decisions concerning Libby's problem.

Many experts now believe that chrysotile asbestos is not nearly as lethal as Libby's tremolite, a much shorter fiber in length than the type of asbestos generally considered to be most fatal upon inhalation.

"Here in Libby, the tremolite is 5-10 times more fibrogenic (produces fibrosis) than chrysotile," said Dr. Alan Whitehouse, who has been treating Libby asbestos patients for nearly 20 years. "They're dealing with chrysotile, and we're dealing with this disease."

Dr. Brad Black, a pediatrician and Lincoln County health officer, says simply reading X-rays from across the country isn't enough to make an educated judgment.

"We're talking about a more potent type of fiber," he said. "This shouldn't be reviewed with chrysotile in mind."

"Most of the academic world knows about chrysotile, but there is a slowness to realize what we're dealing with."

Wheeler's experience has garnered him a position as the only independent contractor hired by HNA to review records of patients in the Grace medical program.

Wheeler reviews X-rays and medical records of those who

have been diagnosed with asbestos disease, and then decides whether the diagnoses are correct. Patients receiving free health care from Grace can be kicked off the medical program if Wheeler decides they don't have lung disease caused by asbestos exposure.

The concern among asbestos victims: one doctor, who has never seen the patient, can give a clean bill of health to patients diagnosed by sometimes three federally-contracted B-readers and multiple private physicians.

"We've been healed," said Gayla Benefield, an asbestosis patient who lost both parents to asbestos-related disease. "Holy cow, we weren't even sick. What were we thinking?"

Benefield is one of a group of people who think that Wheeler may know what he is dealing with.

Wheeler has researched other types of asbestos, but in an interview with *The Western News* Monday he did not indicate any experience with tremolite. However, he said tremolite couldn't be much different than the stuff he's already studied.

"I don't think you're inventing anything new up there in Libby," he said. "Pneumoconiosis has been studied for 100 years. I'm seriously doubtful that you've got some new type of disease that we haven't already seen over and over again."

Chris Weiss, a toxicologist with the Environmental Protection Agency, reported that unusually-high mortality assessments in Libby demand a closer look at tremolite.

"The occurrence of non-occupational asbestos-related disease that has been observed among Libby residents is extremely unusual, and has not been associated with asbestos mines elsewhere, suggesting either very high and prolonged environmental exposures and/or increased toxicity of this form of amphibole asbestos," Weiss reported to EPA on-site coordinator Paul Peronard in a memo dated Dec. 20, 2001. "On this basis, I recommend that steps be

taken to further identify, quantify, minimize and/or eliminate pathways of human exposure to amphibole asbestos ..."

HNA officials say they have no qualms about giving Wheeler the trump card.

"We absolutely trust his judgment," said Dr. Jay Flynn, vice president of medical affairs for HNA. "When you become a B-reader, you have to maintain the certification every four years or else it expires. In fact, Dr. Wheeler was one of the first five B-readers."

In the world of radiology, the status of B-reader is given to experts at reading X-rays and scans. Although much emphasis has been put on the certification by HNA and many pulmonologists, Dr. Whitehouse, who at one time was a certified B-reader, doesn't put much stock in it.

"The B-reader thing is being manipulated," he said.

Wheeler has only reviewed 15 of the 750 cases submitted to HNA. His office received another 15 files this week.

No patients have been dumped from the program, but HNA has indicated that as many as 10 percent of the people enrolled in the program could be released. And since an audit of the program began in February, the percentage of people being accepted into the program has dwindled substantially.

Many prescription medications covered by the Grace plan were dropped without warning, leaving some alleged asbestos patients without means to pay for certain blood pressure medications that Black and Whitehouse say are necessary.

"If these people get constant surveillance and are able to get their medications regularly, we can

HNA officials say they don't want anyone to believe they have a disease when they are completely healthy.

The confusion all boils down to whether harmless symptoms of the first stages of the disease will inevitably lead to further complications, which could include death.

Doctors examining patients

locally are convinced that plaquing - a hard discoloration - of part of a lung will lead to asbestosis and possibly cancer.

It's likely there will be no quick solutions to such issues as whether pleural plaquing in one or both lungs will lead to interstitial fibrosis, and whether that type of scarring with no tumors is classified as asbestosis.

In some cases, Wheeler points out, the early symptoms may only be a nuisance.

"There was a maintenance worker in this building that had plaques the size of pancakes," he said. "... it turns out, he didn't have asbestosis."

Wheeler went on to say that the man has been able to continue his normal routine with little or no difficulty from the lung abnormality.

Wheeler, who says only two asbestos-related deaths have been documented in the past 100 years of autopsies at Johns Hopkins, recently overturned 50 diagnoses of asbestos exposure for one major U.S. automobile manufacturer, he said. Wheeler added that many corporations across the country have commissioned his department to review medical records of asbestos patients.

Wheeler insists that he personally does not gain financially by ruling out asbestos disease and that he serves no special interest. He claims to have no connection to Grace, which started the medical program in April 2000.

Wheeler said in a 1993 deposition at Johns Hopkins that in a span of two years he testified in more than a dozen asbestos lawsuits, in none of which was he a witness on behalf of the plaintiffs.

"I'm not a hired gun," he said.

Wheeler indicated in a deposition nine years ago that histological evidence is the only way to determine if a patient has asbestosis. He says a lack of histological and pathological evidence - lung cells from a living or deceased asbestos victim - leads him to believe that some of the reported cases of asbestosis are incorrect.

"If there are people dying from this, then why aren't autopsies being performed?" he

asked.

A few autopsies have been performed, said Pat Cohen, who works at the Center for Asbestos Related Disease in Libby. The problem with gathering pathological evidence, she said, is that a biopsy may cause additional problems in a living person and that the nearest place to have an autopsy done is Missoula. The cost of an autopsy also is a deterrent to many families that cannot afford the expensive procedure, Cohen said.